5 m 8871 (July 2000)

General Information

Describe the purpose of the organization

For Paperwork Reduction Act Notice, see page 4.

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Form **8871** (7-2000)

Employer identification number 55: 0764021

2 Mailing address (P.O. Box or number, street, and room or suite number)

502 P.C.Cadilly Street

City or town, state, and ZIP code

Charleston WV 253C2

3 E-mail address of organization

Greenleaf B. Custodian's address

Bonita J. Greenleaf

5a Name of contact person

5b Contact person's address

Bonita J. Greenleaf

6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

P. C. Box 3870

City or town, state, and ZIP code

Charleston WV 25338

Part II Purpose

Part III List of All Related Ent 8a Name of related entity	ities (see instructions) 8b Relationship	8c Address
Republicans for Wise	affiliated Committee	1450 One Valley Square Charleston WV 2530
RECEIVED		
OGDEN, UT		

Cat. No. 30405V

Form 8871 (7-2000)	 	Page 2
		mpensated Employees (see instructions)
9a Name	9b Title	9c Address
Bonita J. Greenleaf	Treasurer	502 Piccadilly St. Charleston WV 25302
Susan Small-Plank	Manager	1563 Viewmont Charleston WV 25302
Under penalties of perjury, I declar Revenue Code, and that I have exist is true, correct, and complete.	re that the organization named in armined this notice, including acco	Part I is to be treated as an organization described in section 527 of the Internal mpanying schedules and statements, and to the best of my knowledge and belief,



Information Accepted

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Political Organization Notice of Section 527 Status

Please enter information below to fulfill your requirements for electronic filing of Form 8871:

Employer Identification Number	55 - 0764021
Name of Organization	Bob Wise for Governor Committee
Street Address	502 Piccadilly Street
City	Charleston
State	W
Zip Code	25302
Email address of Organization	greenleafb@aol.com
Name of Custodian of Records	Bonita J. Greenleaf
Name of Contact Person	Bonita J. Greenleaf
File Electronically	

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